

Drug Lab On-Site Worker Renewal Form Renewal Fee \$75.00

All areas of this form must be completed or renewal will be returned and may result in penalty fees being added.

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Please complete the following:	
BUSINESS/EMPLOYER:	HOME:
Name:	Name:
Email:	
Address:	
City,State,Zip:	
Phone:	
Birth Date:	
	optional if provided to the Board with prior renewal)
Please Return This Renewal Form With Your Payment F	
Registration No:	Renewal Fee: \$75.00
Current Expiration Date:	Penalty:
	Total Submitted :
Any renewal fee received after th fee is \$12.50 during the first 12 r	ne expiration date shown will be subject to a penalty fee. The penalty months of delinquency.
	ing out a short form application and payment of a three year ne profession, either in another jurisdiction or in in an exempt on after 5 years of non-practice (A.R.S. 32-127(H));
Questions to be completed by all registrants:	T place my needse in macave of Neurea status.
Have you been convicted of a felony or misdemeanor oth violation since your last renewal? If you answer yes, you official court documents.	
NOTE: Alcohol and drug-related offenses that occur whe considered minor traffic violations.	en driving or riding in an automobile (i.e., DUI, DWI, OWI, etc) are NOT
Has any regulatory agency determined that you violated a rules pertaining to practice of your profession?	any of their statutes or
Have you been disciplined by any regulatory agency sinc	ce your last renewal?
Do you have any pending investigation by any regulatory	·
For any questions answered yes, please provide written e	
Making a false unsworn statement is a misdemeanor	
Signature:	
Internal Use only:	Criminal History Check Completed
Receipt Number: Amount Paid:	No Further Action Required
Revised 4/2/14	Further Information Required Initials:

Date:_

Please Return This Renewal Form Along with Your Payment <u>AND</u> the following: Drug Lab On-site Worker Annual Renewal

Required for all renewals:	
□ Renewal Application	**
☐ Copy of current 8-ho	our HAZWOPER refresher certificate**
□ Copy of current AHE	RA refresher certificate**
□ Application fee**	
Required for first annual re	enewal:
☐ Documentation of su Board as required in R4-30-	accessful completion of an 8-hour training course approved by the 271(B)(4).**
☐ Documentation of su Board as required in R4-30-	accessful completion of an 8-hour training course approved by the 271(B)(5).**
Required for second & all	subsequent annual renewals:
	accessful completion of a 2-hour refresher training course equired in R4-30-271(B)(6).**
0. 5	ur renewal and any submitted payment will be returned which be late and incur a penalty fee.
F	Renewal Form Instructions
Name/ Address box	Please fill in both Home and Business addresses. Check the appropriate box indicating at which address you prefer to receive official correspondence from the Board.
Registration No	Copy from your current Certificate or find online at www.btr.az.gov under Registered Professional Search.
Current Expiration Date	Copy from your current Certificate or find online at www.btr.az.gov under Registered Professional Search.
Penalty(due now)	\$12.50 for part of year the renewal is currently overdue (past the expiration date indicated on the certificate being renewed).
Total Submitted	Sum of the Renewal fee, Penalty (due now). This total is the amount that must accompany your renewal. Make Checks payable to "AZBTR".
Exemption from payment of Renewal Fee	If either situation applies, check the application box. No fee is required if you are applying to change the status of this certificate to either of these categories.
Questions to be completed by all	Answer each of the questions by checking the appropriate box. All questions must be answered in order for the renewal to be processed.

registrants